

# BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross-reference)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DT		2-8-89
O.I.P.E. CLASSIFIER		21	7/15/79
FORMALITY REVIEW		WBM	7-23-94

## INDEX OF CLAIMS

..... Rejected N ..... Non-elected  
 ..... Allowed I ..... Interference  
 (Through numeral)..... Canceled A ..... Appeal  
 ..... Restricted O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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